

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 1
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Senate Majority PAC		FEC IDENTIFICATION NUMBER ▼ C C00484642	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M / D D / Y Y Y Y Y Y 06 / 03 / 2018	

Full Name of Payee Shorr Johnson Magnus		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 06 / 01 / 2018	
Mailing Address 100 N 20th St Ste 201		Amount 12679.51	
City Philadelphia	State PA	Zip Code 19103-1454	Transaction ID : 500006891
Purpose of Expenditure Media Production Costs - Estimate		Category/ Type	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
Name of Federal Candidate Hawley, Joshua, D., ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MO
Calendar Year-To-Date Per Election for Office Sought		2613096.40	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y	
Mailing Address		Amount	
City	State	Zip Code	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
Purpose of Expenditure		Category/ Type	
Name of Federal Candidate		<input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	12679.51
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	12679.51

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Lambe, Rebecca, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
06 / 08 / 2018

Signature